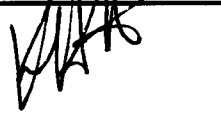


**COUNTY OF SAN LUIS OBISPO BOARD OF SUPERVISORS
AGENDA ITEM TRANSMITTAL**

(1) DEPARTMENT Board of Supervisors		(2) MEETING DATE January 24, 2006		(3) CONTACT/PHONE Khatchik H. Achadjian (805) 781-5450			
(4) SUBJECT Submittal of a Resolution Recognizing Michael Kay for 12 years of Dedicated Service to San Luis Ambulance.							
(5) SUMMARY OF REQUEST On behalf of the Board of Supervisors, Supervisor Khatchik H. "Katcho" Achadjian is requesting adoption of the above-entitled Resolution.							
(6) RECOMMENDED ACTION It is recommended that the Board of Supervisors adopt the attached Resolution Recognizing Michael Kay for 12 years of Dedicated Service to San Luis Ambulance.							
(7) FUNDING SOURCE(S) N/A		(8) CURRENT YEAR COST N/A		(9) ANNUAL COST N/A		(10) BUDGETED? <input type="checkbox"/> YES <input type="checkbox"/> N/A <input type="checkbox"/> NO	
(11) OTHER AGENCY/ADVISORY GROUP INVOLVEMENT (LIST): N/A							
(12) WILL REQUEST REQUIRE ADDITIONAL STAFF? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, How Many? _____ <input type="checkbox"/> Permanent _____ <input type="checkbox"/> Limited Term _____ <input type="checkbox"/> Contract _____ <input type="checkbox"/> Temporary Help _____							
(13) SUPERVISOR DISTRICT(S) 1st, 2nd, 3rd, 4th, 5th, <u>All</u>				(14) LOCATION MAP <input type="checkbox"/> Attached <input checked="" type="checkbox"/> N/A			
(15) AGENDA PLACEMENT <input checked="" type="checkbox"/> Consent <input type="checkbox"/> Hearing (Time Est. _____) <input type="checkbox"/> Presentation <input type="checkbox"/> Board Business (Time Est. _____)				(16) EXECUTED DOCUMENTS <input type="checkbox"/> Resolutions (Orig + 4 copies) <input type="checkbox"/> Contracts (Orig + 4 copies) <input type="checkbox"/> Ordinances (Orig + 4 copies) <input checked="" type="checkbox"/> N/A			
(17) NEED EXTRA EXECUTED COPIES? <input type="checkbox"/> Number: _____ <input type="checkbox"/> Attached <input checked="" type="checkbox"/> N/A				(18) APPROPRIATION TRANSFER REQUIRED? <input type="checkbox"/> Submitted <input type="checkbox"/> 4/5th's Vote Required <input checked="" type="checkbox"/> N/A			

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(1-24-06)*

**IN THE BOARD OF SUPERVISORS
COUNTY OF SAN LUIS OBISPO, STATE OF CALIFORNIA**

PRESENT: Supervisors _____ day _____, 2006

ABSENT:

**RESOLUTION NO.
RESOLUTION RECOGNIZING MICHAEL KAY FOR 12 YEARS OF DEDICATED
SERVICE TO SAN LUIS AMBULANCE**

The following resolution is hereby offered and read:

WHEREAS, Michael Kay has been with San Luis Ambulance serving the citizens of San Luis Obispo County for twelve years; and

WHEREAS, Michael Kay is retiring as a Division Supervisor serving southern San Luis Obispo County, he also leaves as the training coordinator for all new-hire employee training; and

WHEREAS, Michael Kay managed and coordinated EMS response to the Oceano Dunes State Vehicular Recreation Area; and

WHEREAS, Michael Kay served as an Emergency Vehicle Operator Instructor as well as a 4x4/Off-road Instructor; and

WHEREAS, Michael served a term on the San Luis Obispo County Emergency Medical Services Agency Board of Directors; and

WHEREAS, Michael is an extraordinary family man who coaches multiple sports for his children's teams, is a loving and attentive husband, and serves those in need as an Emergency Medical Technician.

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the Board of Supervisors of the County of San Luis Obispo, State of California, does hereby Recognize Michael Kay for his 12 years of Dedication and Service to the citizens of San Luis Obispo County and wish him well in his retirement from San Luis Ambulance.

Upon motion of Supervisor _____, seconded by Supervisor

_____, and on the following roll call vote, to wit:

AYES:

NOES:

ABSENT:

The foregoing resolution is hereby adopted.

Chairperson, Board of Supervisors

ATTEST:

Clerk of the Board of Supervisors

By: _____

Deputy Clerk

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